



BOROUGH OF SWINTON AND PENDLEBURY
EDUCATION COMMITTEE

Twenty-Second
ANNUAL REPORT
of the
School Medical Officer
FOR THE YEAR 1935.



G. HAMILTON HOGBEN, M.R.C.S., D.P.H.

School Medical Officer

Twenty-second

ANNUAL REPORT
of the
SCHOOL MEDICAL OFFICER





BOROUGH OF SWINTON AND PENDLEBURY
EDUCATION COMMITTEE

Twenty-Second
ANNUAL REPORT
of the
School Medical Officer
FOR THE YEAR 1935.

G. HAMILTON HOGREN, M.R.C.S., D.P.H.

School Medical Officer



Education Committee

DECEMBER 1935

Chairman :

Alderman W. S. MYCOCK, J.P.

Vice-Chairman :

Canon D. FLETCHER, M.A.

Members :

Alderman S. Jackson, J.P. (Mayor).	Alderman J. Sumbland.
Alderman J. Bradley, J.P. (Deputy Mayor).	Councillor Mrs. E. T. Kerby.
Alderman E. Alston.	Councillor Mrs. A. M. Inman.
Alderman A. T. Corns.	Councillor J. H. Jones.
Alderman P. W. Potts, C.C.	Councillor Canon E. T. Kerby, M.A., M.C.
	Councillor J. T. Lindley.

Co-opted Members :

Canon D. Fletcher, M.A.	Rev. J. Wilson Ferry.
Rev. E. D. Butters.	F. R. Sparrow, Esq.
Rev. A. Wetherall, B.A.	J. Hardman, Esq.
	Miss O. Fardell.

School Medical Officer :

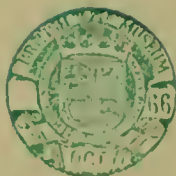
G. HAMILTON HOGBEN, M.R.C.S., D.P.H.

Director of Education :

A. B. MILLS, B.Sc. (Econ.).

Town Clerk :

WILLIAM CARTER, M.B.E.



Contents

	PAGE
Anæsthetic Clinic	26
Artificial Sunlight	29
Aural Clinic	15,23
Blind Children	17,39
Clinics	14
Co-operation	36
Co-ordination	18
Deaf Children	17,24,39
Delicate Children	40
Dental Defects	14,25
Diphtheria Immunisation	34
Ear Disease	24
Employment of Children	44
Enlarged Glands	32
Epileptic Children	39
Eye Disease	17,22
Following-up	32
General Informaton	13
Heart	29,40
Health Education	43
Holiday Camp	34
Infectious Diseases	33
Low Attendance Table	34
Lung Diseases... ..	30
Malnutrition	20
Medical Inspection	19
Mentally Defective Children	16
Milk in Schools	35
N.S.P.C.C.	37
Nutrition Clinic	21
Nursery Schools	42
Nose and Throat	23
Open-air Education	34
Open-air School	15,40
Ophthalmic Clinic	22,23
Orthopædic	14,28

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

	PAGE
Parents' Payments	43
Physical Training	35
Provision of Meals	35
Remedial Exercises	28
Rheumatism	16,29
School Hygiene	19
Secondary Schools	42
Skin Diseases	21
Speech Defects	32
Staff	9
Swimming Baths	45
Tonsils and Adenoids	23
Tuberculosis	30,40
Uncleanliness	21
Vision	22

STATISTICAL TABLES

Appendix (Board of Education Statistical Tables)	46
Artificial Sunlight Clinic	29
Aural Clinic	24,52
Clinic Treatments and Inspections	31
Dental Clinic	27,53
Mentally Defective Children	40,51,54
Minor Ailments	31,51
National Society for the Prevention of Cruelty to Children	38
Open-air School	41,42
Ophthalmic Clinic	23,52
Orthopædic Clinic	28,52
School Accommodation and Attendance	13
Tuberculosis	30,51

Staff of the School Medical Service

Medical Officer :

G. HAMILTON HOGBEN, M.R.C.S., L.R.C.P., D.P.H.

Assistant School Medical Officer (Part-time) :

KATHLEEN MARY BOYES, M.B., Ch.B., D.P.H.

Dental Surgeon :

STANLEY J. GRAY, L.D.S. (Resigned)

W. BAKEWELL, L.D.S. (from 6th January, 1936)

Specialist Medical Officers (Part-time) :

Ophthalmic Surgeon : GORDON RENWICK, M.B., C.M.

Orthopædic Surgeon : ROBERT OLLERENSHAW, M.D., F.R.C.S.

Aural Surgeon : E. S. BURT HAMILTON, M.C., M.B., F.R.C.S., Ed.

Anæsthetist : J. O'GRADY, L.A.H.

School Nurses :

Miss M. J. METHVEN, S.R.N., Cert. R.S.I.

Miss E. BANKS, S.R.N., S.C.M.,

Miss E. A. PORTER, S.R.N. (Resigned)

Miss E. J. THOMAS, S.R.N., S.C.M., H.V. (from 20th January, 1936)

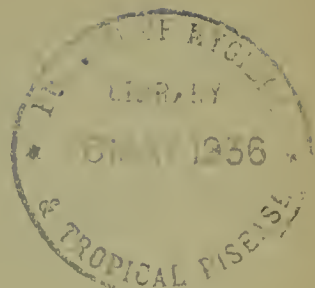
Masseuse (Part-time) :

Miss I. W. MOUNSEY, C.S.M.M.G., M.E., S.R.E., S.R.N.

Clerical Staff :

H. R. Rees, A.I.S.A. (Chief Clerk)	{	comprising the whole of the clerical staff of the Public Health Department.
B. W. Mitchinson		
J. E. Flowers		
Miss D. Hollinshead		

*To the Chairman, Alderman W. S. Mycock, J.P., and Members of the
Education Committee.*



MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present this the twenty-second Annual Report of the School Medical Officer for the year ending 31st December, 1935.

The preparation of an annual report is a duty imposed upon every School Medical Officer and generally follows the lines drawn up by the Board of Education. Much of the information included is based upon comparative tables and figures, which renders it exceedingly dull to the average person requiring only information of the progress and development of this essential medical service.

In view of the recent proposals, however, contained in Circular 1444 issued by the Board of Education affecting the School Medical Service, an attempt has been made to include in this report (Section 1) a clear outline of the existing provisions of the Service in this area and to point out any immediate future requirements.

I wish to express my especial thanks to Alderman W. S. Mycock, J.P., Chairman of the Committee, and to members for the kind consideration extended to me during the past year, and also my appreciation of the willing co-operation of all those who are striving to improve the health of the school child in the Borough.

I have the honour to be

Your obedient Servant,

G. HAMILTON HOGBEN.

TOWN HALL, SWINTON,
31st March, 1936.

1. General Information

The population of the Borough of Swinton and Pendlebury as estimated by the Medical Officer of Health on 31st December, 1935, was 40,058. The school population as recorded on that date was 4,643, which includes 457 children under the age of five years.

Total cost of School Medical Service for the year ending					
31st March, 1935	...	...	...	...	£3522
Parents' contributions	...	...	...	...	£27
Product of Penny Rate (1934-35)...	...	...	...	...	£773
Cost of all Education Services in terms of rate in the £					
after taking into consideration Government Grant					2/11d.
Cost of School Medical Service in terms of rate in the £					
after taking into consideration Government Grant					2.32d.

ELEMENTARY SCHOOLS IN THE BOROUGH.

School	Department	Accommodation	No. on books
<i>Council Schools :</i>			
Cromwell Road	... Boys	500	413
" "	... Girls	500	408
" "	... Infants	250	250
Moorside	... Senior Boys	360	259
"	... Senior Girls	360	242
"	... Junior Mixed	400	402
"	... Infants	300	288
Clifton	... Mixed	296	132
"	... Infants	147	65
St. Paul's	... Infants	148	81
Open Air	... Special	110	119
<i>Non-Provided Schools :</i>			
Christ Church	... J.M. and I.	629	211
St. Augustine's	... Mixed	455	335
"	... Infants	252	126
St. Mark's	... Mixed	297	175
St. Mary's	... Mixed	395	220
"	... Infants	200	114
St. Peter's	... Junior Mixed	400	296
"	... Infants	200	176
St. Stephen's	... Infants	310	157
St. Charles	... M. and I.	186	174
Total, December, 1935	...	6695	4643
Total, December, 1934	...	6695	4709
Total, December, 1933	...	6420	4726

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

SCHOOL MEDICAL SERVICE CLINICS.

In its Administrative Programme for Educational Development (Circular 1444) issued on the 1st January, 1936, the Board of Education draws attention to the need for surveying the arrangements in the School Medical Service, and to make good any existing deficiencies. The Report of the sub-committee appointed to consider the suggestions contained in the Circular was received and approved by the Education Committee on the 2nd March, 1936, and included certain recommendations relating to the School Medical Service. Advantage is taken therefore of this opportunity to outline the present arrangements in respect of those medical services to which the Circular draws attention.

(a) **School Dental Service.** Each child is examined shortly after its entry to school, and annually afterwards throughout its school life. Those children found to have defects are offered treatment under the Authority's scheme, and after acceptance, arrangements are made for the attendance of such children either at the Victoria Park Clinic or at the clinic held at Beechfield House, Folly Lane, Swinton. An anæsthetic session is held once a week at the former clinic, at which the Visiting Anæsthetist also attends. When reviewing the situation the Education Committee concluded that the present arrangements were equal to the standard required by Circular 1444. However, the Committee decided to consider at an early date the following additional dental services: the provision of (i) the treatment of advanced orthodontic cases, and (ii) facilities for dental X-rays.

(b) **Orthopædic treatment.** This Authority's scheme adequately provides for the ascertainment, treatment, and after-care of children (up to the age of 16 years) suffering from crippling defects as required by Circular 1444.

Mr. Robert Ollerenshaw, M.D., F.R.C.S., attends once a month for the purpose of examining and recommending for treatment all children discovered at the Routine Medical Inspections to be suffering from some form of crippling defect. An arrangement exists with the Royal Manchester Children's Hospital, Pendlebury, for in-patient treatment of cases referred by Mr. Ollerenshaw. The out-patient department of that hospital is also included in the arrangement. The cost of treatment and surgical appliances is in the first instance borne by this Authority and the parents are required to make a proportionate charge—determined in accordance with the Authority's scale for assisted treatment—and payable to the Local Authority. The Residential School for Crippled Children, Marple, Cheshire, is available for children who have received a period of in-patient treatment under the above arrangements.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

As part of the scheme for orthopædic treatment there is, in addition to the above arrangements, a Massage and Remedial Exercises Clinic in operation each afternoon in the week. The work of the clinic is undertaken by Miss I. W. Mounsey (Masseuse) who carries out treatment in accordance with the directions of Mr. Ollerenshaw, the Orthopædic Surgeon, and the School Medical Officer.

(c) **Aural Treatment.** Mr. E. S. Burt Hamilton, M.B., F.R.C.S., ear, nose and throat specialist, attends twice a month for the purpose of examining and recommending for treatment all children found to require such attention as a result of periodic inspection in the schools, and whose parents have consented to take advantage of the facilities provided by the Local Authority. An arrangement exists between Park Hospital, Davyhulme, and this Authority for the operative treatment of tonsils and adenoids.

The circular emphasises the need for co-ordination with "Aural Surgeons employed by Authorities responsible for the maintenance of Isolation Hospitals, since so many ear defects in children are the result of attacks of acute infectious disease." This Authority has an arrangement with Mr. Hamilton in which he has agreed to visit Astley Sanatorium (administered by the Leigh Joint Hospital Board of which this Local Authority is a constituent member) whenever requested by the Medical Officer of Health, and to perform at a specified fee operations for mastoid and other defects.

(d) **Open-air School.** The Authority's Open-air School, with accommodation for 110 children, has been in operation for many years. It is a day-school and organised on lines approved by the Board of Education. Children admitted are sent on the recommendation of the School Medical Officer, who attends weekly for the purpose of maintaining medical supervision of children in attendance. A school nurse also attends the school for one hour per day.

The depreciated condition of the buildings is such that the Education Committee have decided to give consideration to the erection of new buildings. A sub-committee is investigating the matter with a view to making recommendations to the Education Committee at an early date.

Circular 1444 makes special reference, in addition to Day Open-air Schools, to the provision of accommodation at Residential Open-air Schools for children in need of such facilities. No case has been met with in this area for several years which could not be satisfactorily

dealt with at the Authority's Day Open-air School. However, when instances do arise of children needing residential school accommodation the Authority will no doubt arrange for their admission to one of the Special Residential Open-air Schools approved by the Board of Education.

(e) **Acute Rheumatism.** The circular points out that "There is a need for increased provision for the special institutional treatment of children suffering or convalescent from acute rheumatism, since this condition, if not suitably treated, may lead to heart disease." The number of such children in this area is small, and so far it has been found possible to provide the necessary treatment at the Authority's Day Open-air School.

The remarks relating to residential school facilities under the previous heading also apply to children suffering from acute rheumatism.

(f) **Mentally Sub-Normal Child.** This subject, although specially mentioned in Circular 1444, is one that received the full attention of the Education Committee in 1935. A special report by the School Medical Officer, reviewing the situation in this district, was considered in November, and the following is a brief account of the contents of the Report together with the recommendations of the Sub-committee appointed to deal with the matter.

(i) **Feeble-minded Children.** There were 22 children coming under this category on the Register at the time of consideration, nine only of whom were in attendance at Public Elementary Schools, the remainder being over 14 years of age. The question of securing the admission of these cases to residential schools was considered, and the sub-committee, on being informed that there was a likelihood of a residential school for educable mentally defective children being opened in Lancashire, decided to defer the matter until further information on this latter possibility was available.

(ii) **Dull or Backward Children.** The members of the sub-committee had before them the information that 44 children under this head known to the School Medical Service were in attendance at Public Elementary Schools, and that in certain schools special classes for this type of child had been formed. It was also pointed out that with regard to Junior School Departments backward children under 11 years of age can be fitted into the ordinary Public Elementary School system, and that in Senior Schools, the very nature of the classification there carried out, minimised the necessity for special organisation. With the assurance that in unrecognised schools special classes for such children had been, or would be, if necessary, formed, it was concluded that all possible steps were at present taken in the matter of the education of dull or backward children.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

(g) **Blind and Deaf Children.** The number of such children in this district is comparatively small, being seven **partially** blind and five **partially** deaf. The need for residential school facilities is present in three and four cases respectively, and these have been accommodated at suitable special residential schools approved by the Board of Education. Provision for such children is therefore adequately covered.

(h) **Eye Defects.** An Ophthalmic Clinic is held twice a month, and additionally when the length of the waiting list warrants, at the Victoria Park Centre. Dr. Gordon Renwick, M.B., C.M., the visiting Ophthalmic Surgeon, is in charge of the clinic. The scheme for the supply of spectacles also includes provision for the attendance at the clinic of an optician. Operations for Squint are referred to, and carried out, at the Manchester Eye Hospital, and an arrangement has recently been made with this hospital for the attendance at its Orthoptic Clinic of children found at this Council's Ophthalmic Clinic to need such treatment.

School Medical Service Clinics.

No.	Clinic	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.
1	MINOR AILMENTS : Victoria Park ...	9—10-30 a.m.	9—10-30 a.m.	9—10-30 a.m.	9—10-30 a.m.	9—10-30 a.m.	9—10-30 a.m.
2	OPHTHALMIC : Victoria Park ...	—	—	10—12 noon alternate weeks	—	—	—
3	AURAL : Victoria Park ...	—	10—12 noon alternate weeks	—	—	—	—
4	ORTHOPAEDIC MAS- SAGE, ETC. : Victoria Park ...	1-30—4 p.m.	1-30—4 p.m.	1-30—4 p.m.	1-30—4 p.m.	(Surgeon Once Monthly) 1-30—4 p.m.	—
5	ARTIFICIAL SUN- LIGHT : Victoria Park ...	3—4 p.m.	—	3—4 p.m.	—	—	—
6	NUTRITION : Victoria Park ...	—	—	—	—	—	10--11-30 a.m.
7	MENTAL : Victoria Park ...	—	10-30--12 noon	—	—	—	—
8	DENTAL : Victoria Park ...	9—12 noon	9—12 noon	9—12 noon	Anaesth. Session	9—12 noon	9—12 noon
	Folly Lane ...	2—4-30 p.m.	School Insp'ns	2—4-30 p.m.	2—4-30 p.m.	2—4-30 p.m.	—

2. Co-ordination

The administrative work of the School Medical Service is carried out in the Health Department under the supervision of the School Medical Officer, who is also Medical Officer of Health with charge of the Local Authority's Scheme for Maternity and Child Welfare. By the fusion into one unit of these services economy and efficiency in administration is promoted, all members of the staff, with the exception of the three school nurses, being available for service in either section to meet the varying needs of the services, and the executive direction and control being vested in one person.

The several treatment schemes brought into the service for the school child are also available for children of pre-school age. Furthermore, the home visiting and Infant Welfare records of a child attaining the age of five years are incorporated in the School Medical system, and the medical history is thus available for the School Medical Officer when the child is examined as an "entrant" at school.

Children under five years of age are examined at the Infant Welfare Centres on the lines provided for routine medical inspection in the schools and the number of such children attending continues to increase. The parent of to-day appreciates the facilities provided for dental and specialist services in the treatment of the pre-school child.

The establishment of nursery classes in a number of schools in the district has given further opportunities for the early detection of defects in the pre-school child. By this means it is possible to treat such defects and so ensure a healthier entrant at school.

In this district the School Medical Officer is also Certifying Factory Surgeon, and, in addition to completing the medical record of school-leavers applying for employment, he is able in certifying "young persons" for employment under the Factory Acts to take with him a register of defects discovered by the School Medical Service. Also by virtue of membership of the Juvenile Employment Advisory Committee he is able to foster the close co-operation which exists between the Secretary of this organisation and the School Medical Service.

3. School Hygiene

Conditions of ventilation, heating, lighting, surface of playgrounds, and adequacy of cloakroom and sanitary accommodation in each school in the district are subjected to inspection by the department once a quarter. Minor defects requiring urgent attention are brought to the notice of the Director of Education, and more gross defects are made the subject of a report by the School Medical Officer to the Committee.

During the Winter of 1934-35, a trial was given at the Cromwell Road Schools to a special attachment to the school boilers. This attachment is designed to ensure (a) the attainment of the correct school temperature in a comparatively short space of time; (b) the maintenance of this temperature during school hours; and (c) a uniform distribution throughout the school. The system proved satisfactory and economical and was adopted. The attachment has also been given a trial period at the Moorside School.

The new schools at Clifton and Pendlebury (St. Augustine's C. of E.), the approval of plans for which was noted in last year's report, are in the course of erection, and are likely to be opened this year. During the year 1935, alterations were carried out at St. Stephen's and Christ Church, both Church of England Schools. Also, resurfacing of the playground of St. Peter's C. of E. School was carried out. Steps are being taken with regard to the surfacing of the playgrounds at the three Roman Catholic Schools in the district, namely, St. Mary's, St. Mark's and St. Charles, together with St. Augustine's C. of E. School, and it is likely that this work will be accomplished during the year 1936.

4. Medical Inspection

Routine. The routine medical inspection of school children is confined to the following three groups, and no exception was made during the year 1935 :—

- (i) The entrants, or those not previously examined since their admission to school.
- (ii) The intermediates, or those who have attained the age of 8 years.
- (iii) The leavers, or those who are 12 years of age and have not been examined since reaching that age.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

Table I (Appendix) shows the numbers of children examined in the various groups together with the numbers found to require treatment, and Table II contains a classification of the defects found. Eleven schools, involving 20 departments, were visited for the purpose of the inspections. The parents of all children due for inspection were requested to be present to witness the examination, and 781, or 56 per cent., took advantage of the opportunity. The corresponding figures for the previous year were 897 and 62 per cent.

The following tabulation relates to the routine medical inspections during the past six years, and shows the percentages of children subjected to examination found to require treatment.

PERCENTAGES OF THOSE EXAMINED.

Year	Entrants	Inter-mediates	Leavers	Total
1930	20.8	22.8	18.3	20.9
1931	23.23	25.44	17.47	23.36
1932	17.52	30.13	22.19	23.39
1933	22.79	30.48	19.85	24.08
1934	19.02	18.89	14.15	17.26
1935	7.43	18.39	18.44	14.49

Special. This heading includes all children of ages other than those included in the routine groups who, in the opinion of the School Medical Officer, the school teachers, or parents, require medical attention. The number of "specials" examined during the year 1935 was 2,439, and a summary of the defects found is contained in Table II. As in the case of routine medical inspections, careful records are kept and the results classified.

Re-inspections. Every child found defective or requiring observation, whether as a "routine" or "special" case, is re-examined from time to time until the condition has been remedied. The total number of re-inspections during the year 1935 was 1,847.

5. Findings of Medical Inspections and 7. Arrangements for Treatment

(a) **Malnutrition.** As requested by Administrative Memorandum No. 124 issued by the Board of Education on 31st December, 1934, particulars relating to nutrition in school children have been classified for the year 1935 in the form required by that memorandum, viz., as set out in Table II B. (Appendix). This classification takes the place of the heading "Malnutrition" previously included in Table II A.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

Table II B shows the nutritional standard, as determined on clinical grounds, of each of the groups of Routine inspections, the standards being Excellent, Normal, Slightly Subnormal, and Defective. It will be seen from the table that a total of four children come under the last category, and this is the number to be used for comparative purposes with figures for Malnutrition previously appearing in Table II, namely, for 1934, 12, and for 1933, 22. With regard to Category C, i.e., children of slightly subnormal nutritional standard, there are 161 such children out of a total of 1,394, equivalent to a percentage of 11.55. It is interesting to note that the percentage of subnormal children found during the Nutrition Survey of November, 1934, in which a total of 4,268 children were examined, was 11.17.

The Nutrition Clinic, which has been held regularly on Saturday mornings for several years, is still in operation, and children found to be in need of treatment or required to be kept under observation are requested to attend.

(b) **Uncleanliness.** The total number of examinations of children at the Cleanliness surveys in the schools conducted by the School Nurses, was 12,092 as compared with 13,357 in the previous year. The number of individual children found unclean was 602, which represents 13 per cent. of the total school population. These figures compare unfavourably with the total of 502 unclean children and percentage of 10.7 recorded in the year 1934. It should be noted that all cases of uncleanliness, *however slight* are included.

A child found to be verminous is excluded from school, and the parent is given instructions to render the child free from vermin. In cases where a parent refuses to cleanse the child, a notice "to seize and cleanse" is served. The task of cleansing is undertaken either at the Council's Cleansing Station or at the School Clinic. It was not found necessary to cleanse any child under this latter arrangement during the year.

(c) **Skin Diseases.** The combined totals of the various diseases of the skin—viz., 303 of which eight only were discovered at the Routine inspections—represents 7.9 per cent. of the total children examined during the year as compared with 10.4 per cent. for the year 1934.

There were two cases of **Ringworm**—one of the scalp and one of the body. The case of scalp-ringworm was treated under private arrangements made by the parent, and the case of ringworm of the body received treatment at the Council's clinic.

Fourteen cases of **Scabies** were found during the year as compared with 54 in the previous year. Thirteen were treated at the Minor Ailments Clinic, necessitating 107 attendances for treatment.

Two cases of **Impetigo** were found at the Routine Inspections and 152 at the Special Inspections, as compared with 5 and 218 respectively in the previous year. Actually, 155 children were treated at the Clinic, involving a total of 1,552 attendances.

Children suffering from **Other Skin Diseases** totalled 133 as compared with 178 in the previous year. Three cases were treated by means other than those offered by the Authority, and 120 at the Minor Ailments Clinic. The number of attendances for treatment involved by the latter was 1,309.

(d) **Visual Defects and External Eye Diseases.** Nine children were found at the Routine Inspections to be suffering from **External Eye Diseases**, and 199 at the Special Inspections; all were referred for treatment except three of the latter. The corresponding numbers for 1934 were: six at the Routine Inspections, 194 at the Special Inspections, and 198 of the resultant total referred for treatment.

The total number of external eye conditions treated at the Minor Ailments Clinic was 187 and the number of attendances made for the purposes of treatment 2,132. In the previous year, the numbers were 189 and 3,331 respectively.

The number of children found to have **Defective Vision** and **Squint** was 111 and 8 respectively at the Routine Inspections and 18 and 17 respectively at the Special Inspections. The number requiring treatment in respect of defective vision was 91 and in respect of squint 23, making a total of 114 new cases referred to the Ophthalmic Surgeon, as compared with 113 in the previous year and 115 in 1933.

The total number of **errors of refraction** treated during the year was 336. These together with 26 other defects of the eyes were dealt with at the Council's Ophthalmic Clinic. The total of 362 compares with 335 in the year 1934.

The number of Ophthalmic Clinic Sessions held during the year was 42; the number of individual cases examined 362; and the total attendances 691. Spectacles were prescribed by the Ophthalmic Surgeon in 152 cases, and of this total 149 children were provided with spectacles under the Authority's scheme. An additional two children treated otherwise than by the Authority's scheme were found to have been duly provided with spectacles. The following operations were carried out at the Royal Eye Hospital, Manchester: 3 Cataract, 3 Squint, 3 Chalazion, and 3 Ulcer of Cornea.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

The list below, which relates to the past three years, is a summary of the defects treated by the Ophthalmic Surgeon (Dr. Gordon Renwick):

CONDITIONS TREATED.						1933	1934	1935
REFRACTIVE ERRORS.								
Hypermetropia	...	...	...	...	...	54	53	74
Myopia (under 6 dsph)	...	...	...	...	...	29	21	28
Myopia (over 6 dsph)	...	...	...	...	...	4	5	6
Hypermetropic Astigmatism	...	...	...	...	...	4	10	16
Compound Hypermetropic Astigmatism	...	...	...	...	...	68	71	92
Myopic Astigmatism	...	...	...	...	...	3	2	11
Compound Myopic Astigmatism	...	...	...	...	...	19	24	30
Mixed Astigmatism	...	...	...	...	...	46	25	45
Emmetropia	...	...	...	...	...	3	5	5
Anesometropia	...	...	...	...	...	9	12	15
DISEASES OF CONJUNCTIVA AND LIDS.								
Conjunctivitis	...	...	...	...	...	8	13	14
Blepharitis	...	...	...	...	...	6	11	6
Hordeolum	...	...	...	...	...	3	5	1
Chalazion	...	...	...	...	...	1	2	6
DISEASES OF MUSCLES.								
Convergent Strabismus	...	...	...	...	...	61	67	73
Divergent Strabismus	...	...	...	...	...	1	3	3
DISEASES OF CORNEA AND IRIS.								
Ulcer of Cornea	...	...	...	...	...	—	2	4
Phlyctenular Keratitis	...	...	...	...	...	—	5	3
Nebula Cornea	...	...	...	...	...	—	6	5
Adherent Leucoma	...	...	...	...	...	—	1	1
Optic Atrophy	...	...	...	...	...	—	4	3
CONGENITAL ANOMALIES.								
Albinism	...	...	...	...	...	2	1	1
Cataract	...	...	...	...	...	2	4	5
Lachrymal Obstruction	...	...	...	...	...	1	2	2

(e) **Nose and Throat Defects.** All cases of enlarged tonsils and adenoids found during the Routine and Special inspections, which in the opinion of the School Medical Officer were causing or likely to cause injury to the child's health, were referred to the Specialist Aural Surgeon. The number of cases so referred during the year amounted to 115 in comparison with 106 in 1934. The number of cases referred for further observation as likely to subside or improve as the result of conservative treatment, e.g., dental sepsis, etc., amounted to 74 as compared with 107 in the preceding year.

The total number of defects treated under this head during the year was 258, of which 105 received operative treatment for the removal of tonsils and/or adenoids and the remainder some other form of treatment. The total of 258 compares with 257 for the previous year, and the number receiving operative treatment, namely 105, compares with 109 for 1934.

Adequate arrangements are made for the hospital treatment of enlarged tonsils and adenoids, providing for consultant, hospital, ambulance, home-nursing, and after-care services. The number of cases operated on at Park Hospital, Davyhulme, during the year was 99 compared with 106 in 1934; the cases dealt with apart from the Authority's scheme numbered 6, in comparison with 3 in 1934.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

Twenty-three sessions of the Aural Clinic were held during the year; 258 children were examined, and the attendances reached a total of 411. The corresponding figures for 1934 were: 25 sessions, 291 children, and 462 attendances. Mr. E. S. Burt Hamilton, Consulting Aural Surgeon, has submitted the following figures with regard to the defects treated, together with a note which is reprinted in full. The lists for 1934 and 1933 are included for the purpose of comparison.

CONDITIONS TREATED.						1933	1934	1935
EAR (excluding Tonsil and Adenoid Cases)								
Otitis externa	...	...	...	...	...	1	2	1
Cerumen only	...	...	...	...	...	2	1	4
Non-suppurative ear disease	...	...	...	...	...	7	8	10
Acute suppurative Otitis media	...	...	...	...	...	11	15	7
Chronic suppurative Otitis media	...	...	...	...	...	27	23	6
Results of C.S.O.M.	...	...	...	...	...	13	8	5
NOSE (excluding T and A cases)								
Nasal discharge	...	...	...	...	...	5	10	20
Epistaxis	...	...	...	...	...	—	1	3
Deflected Nasal Septum, injuries, etc.	...	...	...	...	...	8	11	7
Atrophic Rhinitis	...	...	...	...	...	1	2	2
TONSIL AND ADENOID operation recommended						193	180	166
Chief Indications:—								
Repeated Tonsillitis	...	...	...	...	...	26	40	42
Nasal obstruction from Adenoids	...	...	...	...	...	45	35	24
Adenitis	...	...	...	...	...	63	45	32
Bronchitis	...	...	...	...	...	19	22	14
Rheumatism	...	...	...	...	...	2	6	4
Aural disease due to Adenoids	...	...	...	...	...	36	25	33
Re-operation—recurrent tonsillitis	...	...	...	...	...	1	2	1
Diphtheric carrier	...	...	...	...	...	1	1	—
General ill-health due to Tonsils and Adenoids	...	...	...	...	...	—	2	15
Speech defects	...	...	...	...	...	—	2	1
THROAT other than above								
Acute Pharyngitis	...	...	...	...	...	1	—	5
Laryngitis	...	...	...	...	...	1	1	2
Post-diphtheria paresis	...	...	...	...	...	—	1	—
Congenital Syphilis	...	...	...	...	...	—	—	1
CASES INSPECTED or postponed						31	23	19

Mr. Hamilton concludes his report with the following remarks:—
 “To avoid duplication, cases have been classified under the most important condition present. The numbers of cases of bronchitis and rheumatism are almost certainly too low, as only cases in which there was definite evidence of these conditions were classified as such. Both conditions had probably been present in a good many other cases. No important complications of the operation for the removal of tonsils and adenoids occurred—all cases are inspected some weeks after operation.”

(f) **Ear Disease and Defective Hearing.** There were three cases of **Defective Hearing** discovered during the year; they were met with at the Routine Inspections and referred for treatment. Under the other categories of this heading, namely, Otitis Media and Other Ear Diseases, 46 and 25 respectively were referred for treatment.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

Sixty-two children were treated at the Minor Ailments Clinic, and 2,629 attendances were made for treatment. The number of these attendances for Otorrhoea alone was 2,521.

The report of the Aural Surgeon included in the previous sub-heading gives particulars of ear disease treated at the Aural Clinic during the past three years.

(g) **Dental Defects.** The statistics required by the Board of Education in respect of the work of the Authority's Dental Clinics are contained in Table IV, Group V (Appendix). Additional information is set out in the table below.

It will be noted that the number of children examined at the Routine Dental Inspections in the Schools during the year reached a total of 3,612 in comparison with 4,871 in the previous year. The smaller number for 1935 is a reflection of the reduction of the number of sessions devoted to routine inspection, namely, 40 as against 63 in 1934. The length of the waiting list towards the latter part of the year made it necessary to utilise the one session per week normally devoted to inspection for the purposes of treatment.

A further 832 children were examined as "specials" on account of urgency, having come to the notice of the Service by reference from teachers or parents. The corresponding number for 1934 was 797.

Of the children examined at the Routine Dental Inspections, 1,967 were found to require treatment, which is approximately 54 per cent. of the total inspected at these inspections. The proportion needing treatment in 1934 was 51 per cent. and for 1933, 47 per cent.

As the result of both types of dental inspections, that is, Routine and Special, the total number of children referred for treatment was 2,799. The number actually treated during the year at the Authority's Dental Clinics reached a total of 2,385, the attendances made for the purposes of treatment being 3,760. The percentage of children treated to children referred for treatment is therefore 85 per cent. as compared with 75 per cent. in 1934 and 86 per cent. in 1933. Reference was made in this Section of last year's report to the need for the re-establishment of an efficient "following-up" system in the School Dental Service. The action taken during the year 1935 towards this end is mentioned in Section 6, page 33 of this Report.

Mr. Stanley J. Gray, L.D.S., who had been Dental Surgeon to this Authority for over four years tendered his resignation in October, 1935, and completed his period of service at the end of the Christmas term,

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

Mr. W. Bakewell, L.D.S., who was appointed to succeed Mr. Gray commenced duties on the 6th January, 1936. The School Medical Officer is indebted to Mr. Bakewell for the following remarks :—

“ The aim of the dental service is to ensure that every child possesses a sound dentition whilst at, and on leaving school. The hygiene of the mouth is of supreme importance and it is impossible to attain perfect health if the teeth are in a septic and unsound condition. This is most important during the child's school life when growth and development of the body are taking place. Also, it is the opinion of the dental service that once a child becomes accustomed to practising oral hygiene, the habit will persist in adult life, with a consequent reduction of disease due to septic oral conditions. But, dental treatment alone will not produce perfect teeth. The regular brushing of the teeth is of equal importance, and active propaganda is necessary to drive home this lesson to the child. While being assured of the excellent co-operation that exists between the head teachers and all branches of the School Medical Service, I take this opportunity of informing the head teachers and staffs at the Schools that their continued assistance in the School Dental Service will be greatly appreciated.

“ The policy of the dental department at present is to treat conservatively every dental lesion however minute, and so prevent an extension of caries which would occur before the next inspection. This necessitates a greater number of attendances per child at the clinics, some making eight or more visits, but will eventually prove to be the most effective means of combating dental disease from an operative standpoint.”

The **Dental Anæsthetic Clinic** is held one session per week during the School terms, and supplemented by extra sessions when required to reduce a lengthy waiting list. Fifty-four sessions were held during the year 1935, and 790 general anæsthetics administered, the latter being classified as follows :—

No. of Routine Cases	...	...	...	...	429
No. of Specials and Emergencies	...	...	...	...	326
No. of Children under 5 years of age	...	...	...	...	35
					<hr/>
					790

Dr. O'Grady the visiting Anæsthetist reports as follows :—

“ As in previous years the routine anæsthetic employed is gas and oxygen, combined with ethyl chloride ; except in the case of very young children, when gas and oxygen alone is used. This anæsthetic

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

is pleasant to take and normal healthy children are not frightened by it. During the ten years I have been administering anæsthetics at this Clinic, I have not had a single case about which I have had any real anxiety after the anæsthetic has been given. The after-effects are, in the majority of cases, negligible. In the few cases in which vomiting has occurred after the anæsthetic, the cause has invariably been that the child has been given a meal before coming to the Clinic. This is, of course, contrary to the instructions which are issued to the parents, the importance of which is not always realised by parents.

“ Each child is examined by me before the anæsthetic is administered as regards general health. If there is any doubt as to the child's fitness for an anæsthetic I interview the parent. If necessary, the child is then referred either to the School Medical Officer or to the family doctor.

“ In practically every case the child is fit to return to school on the following morning, and many are fit to return the same afternoon.”

Dental Clinic in 1935.

Nature of Work Done	Routines	Specials	Under 5	Total
Attendances at Clinic	2472	1190	98	3760
Attendances at Clinic for other purposes than Treatment	264	539	58	861
Appointments :				
Made	2710	1252	103	4065
Kept	2472	1190	98	3760
Broken	238	62	5	305
New Patients	528	397	75	1000
From Former Years	940	435	10	1385
Repeated Treatments	1004	358	13	1375
Fillings :				
Temporary	126	33	12	171
Permanent	1317	200	—	1517
Total Number of Fillings	1443	233	12	1688
Extractions :				
Temporary	1267	1144	135	2546
Permanent	399	237	41	677
General Anaesthetics	429	326	35	790
Local Anaesthetics	109	63	—	172
Other Operations :				
Temporary	—	—	—	—
Permanent	293	60	4	357
Scalings :				
Temporary	2	4	—	6
Permanent	379	17	1	397

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

(h) **Orthopædic and Postural Defects.** The number of children found at the Routine and Special Inspections to be in need of treatment for some form of crippling defect was 36 as compared with 46 in the previous year. A further 4 children were referred for observation. Of those needing treatment, 1 was a case of Rickets and 4 were instances of Spinal Curvature, the remainder being classified under "other forms" of crippling defects.

Eleven sessions of the **Orthopædic Clinic** were held during the year 1935 as compared with 12 in 1934. Mr. Robert Ollerenshaw, Orthopædic Surgeon, was in attendance on each occasion, together with the Masseuse. The latter was also in attendance daily from 1.30 to 4.30 carrying out prescribed treatment in Massage, Electrical Treatment, and Remedial Exercises. The total number of sessions held with the Masseuse alone in attendance was 219.

The table given below sets out the diseases treated, together with the attendances at the Orthopædic Clinic, and the Remedial Exercises Clinic. The total examinations made by the Orthopædic Surgeon was 311 in 11 sessions, as compared with 329 in 12 sessions in 1934. The totals for the Massage and Remedial Exercises Clinics for 1935, namely, 219 sessions and 2,819 attendances compares with 218 sessions and 2,664 attendances for 1934. The totals of the latter clinic include 1,268 and 1,085 in the respective years for Artificial Light Treatment.

Orthopædic and Postural Defects.

Disease	No. of Examinations by Orthopaedic Surgeon		No. of Attendances for Treatment by Masseuse		Total Attend- ances
	Under 5	Over 5	Under 5	Over 5	
Infantile Paralysis ...	4	8	47	—	59
Congenital Talipes ...	15	1	—	—	16
Hemiplegia ...	4	7	—	43	54
Rickets ...	33	9	94	—	136
Birth Paralysis ...	—	6	—	45	51
Congenital Deformity	1	2	—	37	40
Injury ...	—	4	—	95	99
Pes Planus ...	6	44	29	253	332
Remedial Exercises ...	1	7	32	301	341
Various ...	57	102	133	442	734
Artificial Light ...	—	—	644	624	1268
Totals ...	121	190	979	1840	3130

The cases which received hospital treatment are as follows:— Hammer toe, 1 ; Spastic hemiplegia, 2 ; Haemophilia, 1 ; and Pseudo Coxalgia, 1 ; making a total of 5 as compared with 8 last year. The

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

number of X-ray examinations was 16 ; and splints, appliances, etc. were provided in 46 instances. The respective numbers for 1934 were 16 and 71.

The **Artificial Sunlight Clinic** is conducted under the supervision of the School Medical Officer, the treatments being undertaken by the Masseuse on four sessions per week. The numbers of individual cases dealt with are shown in the table below ; the attendances of those over five years of age reached a total of 624 as compared with 317 in the previous year, and those under five years, 644 as against 768 in 1934.

Conditions Treated by Artificial Sunlight.

Disease Treated	Individual Treatments			Results		Failure to complete Course
	Boys	Girls	Total	Improved	Stationary	
Rickets	8	5	13	9	—	4
Bronchitis	5	8	13	9	1	3
Cervical Adenitis	5	8	13	10	1	2
Malnutrition & Debility	17	19	36	26	3	7
Enuresis	11	9	20	15	2	3
Alopecia	1	—	1	1	—	—
Anaemia	4	1	5	3	—	2
Other Conditions	4	13	17	11	2	4
TOTALS	55	63	118	84	9	25

(i) **Heart Disease and Rheumatism.** Twenty-five children at the Routine inspections and 4 at the Special inspections were found to have organic heart disease. Two were referred for treatment. The total from both examinations, i.e. 29, compares with 24 for the previous year. The cause of this disease is in the majority of cases rheumatism. There is no special class in the district for children suffering from heart disease. Those fit to attend school are placed in the ordinary class, and when necessary excluded from participating in physical training lessons, or sent to the Open-Air School, where systematic rest may be obtained.

Under the heading of functional heart disease, a total of 12 children was recorded, all of whom were required to be kept under observation.

There were 43 children found to be suffering from anæmia, 34 of whom were referred for treatment. The corresponding figures for the year 1934 were 45 and 36.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

(j) **Tuberculosis.** A total of four cases under this heading was found at the Inspections during the year. None of these children suffered from the pulmonary form of the disease, and one only—with tuberculosis of the glands—was found to require treatment. The others were put down for observation.

All suspected cases are referred to the Dispensary, Station Road, Pendlebury, for the opinion of the County Tuberculosis Officer, who immediately undertakes the care of any active cases of tuberculosis thus brought to his notice.

Adequate arrangements are made for dispensary supervision and treatment, Hospital and Sanatorium accommodation, X-Ray examinations, Ultra-Violet Light treatment, and After-care supervision.

Dr. George Jessel, M.D., D.P.H., Consulting Tuberculosis Officer to the Lancashire County Council, reports as follows :—

Treatment of Tuberculosis in Children :

Admitted to Sanatoria	...	...	...	...	...	1
Admitted to Pulmonary Hospitals	...	...	...	...	...	—
Admitted to General or Special Non-Pulmonary Hospitals	...	...	...	...	...	1
Granted " Light " Treatment	...	...	...	...	...	3
Granted X-Ray Examination	...	...	...	...	...	10
Granted Dispensary Supervision	...	...	...	...	...	12
Granted Dispensary Supervision with provision of special nourishment	...	...	...	...	...	2
Under supervision at the end of the year	...	...	...	...	...	14
Recovered and taken from Register	...	...	...	...	...	1

The cases under supervision at the end of the year have been classified as follows :—

Pulmonary	...	...	...	...	...	...	2
Non-Pulmonary	...	...	...	...	...	...	12
Combined (Pulmonary and Non-Pulmonary)	...	...	...	...	...	...	—

(k) **Lung Diseases other than Tuberculosis.** The number of cases scheduled under this category reached a total of 103 in comparison with 157 in the previous year. Bronchitis was responsible for 94 of the total, 14 being found at the Routine inspections and 80 at the Special inspections. Children suffering from the effects of bronchitis are referred for treatment at the School Clinic and allowed cod-liver oil. In some instances they may be recommended, in addition, artificial sunlight treatment.

Minor Ailments Clinic.

TREATMENTS.

Disease	No. of Treatments	
	1934	1935
Impetigo	2,680	1,552
Scabies	252	107
Ringworm of Head	—	—
Ringworm of Body	—	3
Other Skin Diseases	2,167	1,309
Blepharitis	2,094	777
Conjunctivitis	958	969
Other Eye Disease	279	386
Otorrhoea	4,084	2,521
Other Ear Disease	83	108
Nose and Throat	38	57
Miscellaneous and Minor Injuries	4,410	4,541
TOTALS	17,045	12,330

Minor Ailments Clinic.

INSPECTIONS.

Disease	Special Inspections		Re-Inspections	
	1934	1935	1934	1935
Malnutrition... ..	8	3	27	6
Uncleanliness—Head	3	1	1	4
Ringworm—Head	2	1	5	1
Body	1	1	1	—
Scabies	49	14	80	54
Impetigo	218	152	42	20
Other Skin	174	129	61	68
Blepharitis	55	32	7	8
Conjunctivitis	82	106	9	76
Defective Vision	23	18	14	15
Squint	15	17	3	6
Other Eye Disease	57	61	7	17
Defective Hearing	9	3	2	—
Otorrhoea	52	46	45	34
Other Ear Disease	23	22	8	20
Adenoids	3	5	1	6
Chronic Tonsillitis	48	54	47	47
Chronic Tonsillitis and Adenoids	10	11	60	39
Other Nose and Throat	206	181	185	250
Enlarged Cervical Glands	33	38	18	35
Speech	1	1	1	1
Teeth... ..	138	146	7	27
Heart—Organic	6	4	22	16
Functional	6	6	4	8
Anaemia	19	21	27	56
Bronchitis	96	80	106	114
Other Non-T.B. Chest	4	7	8	22
Phthisis	—	—	2	—
Suspected Phthisis	1	—	—	—
T.B.—Glands	1	1	—	1
Other Bones and Joints	—	—	—	—
Other Forms	—	2	—	—
Nervous System—Epilepsy	5	—	29	5
Chorea	8	6	15	7
Other Forms	6	8	3	7
Deformities—Rickets	1	1	—	1
Spinal Curvature	—	1	3	2
Other Deformities	30	25	22	30
Minor Injuries	568	483	70	43
Other Defects and Diseases	964	752	514	801
TOTALS	2,925	2,439	1,456	1,847

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

(l) **Enlarged Cervical Glands.** The number of children found during the year to have enlarged glands of the neck (non-tubercular) was 55 as compared with 61 in the year 1934. Forty-six cases were referred for treatment and the remainder kept under observation. In the treatment of this condition the causative factor is first sought for and is commonly found to be impetigo, septic sores, dental caries or unhealthy enlarged tonsils. The appropriate treatment is applied and in many cases followed by a course of general and local artificial sunlight.

(m) **Speech Defects.** Two children were found to have some defect of speech. One case was referred for treatment. For particulars of the provision made by the Education Committee for the treatment of children suffering from speech defects and who are amenable to treatment, see Annual Report, School Medical Officer 1932, page 15, and 1933, page 23.

6. Following Up

Parents who are present at the routine, medical, and dental inspections when their children are being examined are informed of any defects which may exist and given appropriate instructions regarding treatment. It is apparent that parents sufficiently interested to be present at the inspection of their children are also anxious to co-operate if any treatment is deemed necessary. There are, however, parents who either cannot or will not assist in this manner, and it is the duty of the school nurse to visit the home for the purpose of stimulating action likely to result in either private medical treatment or a visit to the appropriate clinic of the Council.

The number of visits paid by the School Nurses to the homes of children found at the routine or other inspections to be suffering from some defect was 538, as compared with 581 in the previous year. The following table indicates the types of visits made by the nurses and the number of visits made under each heading during the past two years.

	1935	1934
1. Number of Children examined in School for infectious disease	5303	4955
2. Visits to homes regarding children who have not presented themselves for dental treatment	120	96
3. Visits to homes regarding children found at Routine inspections to be in need of treatment	418	485
4. Number of children seen in school regarding the wearing of spectacles	664	962
5. Number of such children found not wearing spectacles and in respect of whom appropriate action was taken ...	96	114

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

Attention was drawn in the Annual Report for 1934 to the inability of the Department to follow-up dental cases owing to insufficient staff. It will be seen from the above table that 96 dental visits were made in 1934. These were made up as follows : 41 in January of that year, 45 in April and 10 in November. No visiting of dental cases was possible from November, 1934, until September, 1935, when a scheme for following-up, formulated by the School Medical Officer and agreed to by the Committees concerned, was put into operation. From the latter date a more or less satisfactory system of following-up for dental cases has been possible. To accomplish the work without increasing the staff, it was found necessary to share the visits between the whole of the Council's nursing staff, i.e., School Nurses and Health Visitors. The Health Visitors had previously taken no part in the work of the School Medical Service and, having regard to the steady increase in the work of the department of Maternity and Child Welfare, it is doubtful if the present scheme can be of long duration.

8. Infectious Diseases

The numbers in the previous section relating to children examined in schools for infectious diseases, namely, 5,303 for 1935 and 4,955 for 1934, suggest an increase in the incidence of infectious diseases in school children during the year 1935. This, however, is not so ; the table given below shows the numbers of each type of disease for the past two years.

								1935	1934
NOTIFIABLE INFECTIOUS DISEASES :									
Scarlet Fever	...	...	...	...	...	...	...	37	47
Diphtheria	...	...	...	...	...	...	...	34	88
Pneumonia	...	...	...	...	...	...	...	1	5
Pulm. T.B.	...	...	...	...	...	...	...	2	1
Non-pulm. T.B.	...	...	...	...	...	...	...	3	2
NON-NOTIFIABLE INFECTIOUS DISEASES :									
Measles	...	...	...	...	...	...	...	5	309
Whooping Cough	...	...	...	...	...	...	...	88	92
Chicken-pox	...	...	...	...	...	...	...	140	96
Mumps	...	...	...	...	...	...	...	—	5

It was not considered necessary during the year 1935 to order the temporary closure of any school as a result of infectious disease, although outbreaks of whooping cough and colds in the latter part of the year reduced the attendances at certain schools to a very low figure. The following is a list of low attendance certificates issued by the School Medical Officer. The total of seven certificates compares with 18 in the previous year and 34 in 1933.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

LOW ATTENDANCE CERTIFICATES—1935.

School	Period		Nature of Epidemic	Percentage in Attendance
	From	To		
Clifton Council Inf. ...	18 Nov.	22 Nov.	Whooping Cough	54
" " " ...	25 "	29 "	"	54
" " " ...	2 Dec.	6 Dec.	"	52
St. Paul's " " ...	2 "	6 "	Influenzal Colds	55.5
" " " ...	9 "	13 "	Coughs and Colds	56.7
Clifton " " ...	9 "	13 "	"	53.3
" " " ...	16 "	20 "	"	Below 60

Note was made under this section in the Annual Report for 1934 of the noticeable increase in the number of children seeking **immunisation** against Diphtheria. It is regretted that this enthusiasm has not been maintained. Immunisation serum is supplied to medical practitioners on request, but no figures are available. Eighteen children attended the clinic for protection against Diphtheria. One of the children immunised was notified later in the year as a positive case of Diphtheria.

9. Open-Air Education

The number of children who attended the holiday camp at Conway, North Wales, was 183 as compared with 228 last year. The length of stay during 1935 was a fortnight in each case as against one week in the previous year.

The School Medical Officer is indebted to Mr. Beddow, Hon. Secretary of the Fund for the following report :—

" In May, 1935, by sending 183 carefully selected children to Conway for a fortnight's holiday under ideal camping conditions, this Fund provided an even greater service than in previous years. The children were in the care of teachers and helpers from our own district, one teacher and one helper for every 30 children. Lessons in the open, educational rambles, and organised games are carefully planned, and it is remarkable how happily the children respond. The following is an extract from the report of the teacher in charge of the camp :—

' Monday saw the children wondering as to the form " school " would take. Would it mean the wearying round of Arithmetic, Reading and Writing, or would such picturesque surroundings bring forth some new type of school? Quickly their minds were put at rest, as each teacher took his or her party away from the

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

Camp and settling them down in some pretty spot began the Camp lessons. How quickly the measuring of heights and distances became a jolly game ; how interesting a lesson on the tides became when that hitherto theoretical phenomenon was here at hand, to be viewed and its progress up the beach easily measured. The usual lifeless History lesson sprang suddenly to life when discussed amidst the historical ruins of the Castle. Sketching was a most desirable subject and many splendid results were obtained.

‘ In addition to these activities, many visits of an educational character were made and lessons given on the spot. The boys were greatly impressed by the Suspension and Tubular Bridges and the local stone quarries were always items of interest.’

“ For 1936 this Fund hopes to increase its useful activities by sending 210 children to Conway for two weeks.”

10. Physical Training

This is included as part of the daily routine in each school, and usually occupies 20 to 30 minutes each day. No gymnastic apparatus is available in the older schools, nor is a physical-training instructor employed, dependence being placed upon the members of the teaching staff, who have undergone training in this subject at their respective Training Colleges. The new Moorside School, however, includes a gymnasium, and with the employment of a physical instructor it will be possible to incorporate one physical-culture lesson in the daily curriculum of each class.

The role of the School Medical Service staff is limited to a general encouragement of the work, to observance of its effect upon certain children, and to proffering advice regarding individual pupils found to be suffering from defects such as heart disease which are likely to be influenced exceptionally by physical training of any kind.

11. Provision of Meals

The following numbers relate to meals provided to school children during the past 4 years—year ending 31st March in each case :—

				1935	1934	1933	1932
Breakfasts	...	...	...	21,152	20,459	22,023	17,061
Dinners	...	...	...	27,269	27,499	23,672	18,131
				<hr/> 48,421	<hr/> 47,958	<hr/> 45,695	<hr/> 35,192
No. of children involved	...			142	225	176	156

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

All the above meals are those supplied free of charge to necessitous children. The practice of supplying supplementary **milk** meals to necessitous children, who are recommended for such additional nourishment by the School Medical Officer, was commenced in October, 1934, and the number of milk meals given free of charge to the recipients during the period ending 31st March, 1935, was 6,618. The number of individual children involved in the provision of milk meals was 248. Some of these children also received free meals and the total of individual children involved in both schemes amounted to 295.

The figures above relating to milk meals do not include children receiving daily bottles of milk at the price of one-halfpenny per one-third of a pint made possible by the operation of the Milk Marketing Board Scheme. Note was made in last year's Annual Report (page 38) of the increase in milk consumption which had been brought about by the introduction of the scheme. The total number of children taking milk prior to the 1st October, 1934, the date of inception of the Milk Marketing Board's Scheme, was 1,224. This total had increased to 3,162 (including free milk) within one week of the introduction of the scheme, and on 31st March, 1935, stood at 3,258, or approximately 68 per cent. of the total school population.

12. Co-operation

Every possible effort is made to interest **parents** in their children's health. The parents of children required to be examined at the Routine Inspections are requested to be present, and the number attending in 1935 reached a total of 780 or 56 per cent. of the total children examined. While this proportion is still good, it shows a reduction of 6 per cent. on that of the previous year. Parents generally are very appreciative of the advice given to them at the inspection regarding the health of their children and, needless to say, no opportunity is lost of making the parent feel that her co-operation is essential to the success of the School Medical Service.

Reference has been made in previous Annual Reports to the invaluable help provided by the **teaching staffs** in the various schools towards facilitating the work of routine medical and dental inspections. Opportunity is now taken to acknowledge the continued co-operation of the teachers throughout the year 1935, and to record once again appreciation of the credit due to them for the regular attendance of children under treatment at the School Clinics, without which the high standard of work accomplished would be impossible.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

Co-operation between **School Attendance Officers** and the School Medical Service is an essential feature of any school medical scheme, and it would be unjust to proceed with a report of this nature without recording acknowledgment of the work of the School Attendance Officers in this district as far as it affects the School Medical Service. The practice of bringing to the notice of the School Medical Service any absenteeism alleged to be due to illness is one that aids considerably in the detection and treatment of defects that would otherwise not be brought to the notice of the department. Parents as a rule are only too anxious to obtain treatment for their children and the parent who neglects the ailing child to-day is the exception rather than the rule. However, while this possibility remains, chief dependence for the detection of children suffering from untreated defects is placed upon the School Attendance Officers.

Acknowledgment of the very helpful work of **voluntary agencies** is expressed in particular to the National Association for the Prevention of Cruelty to Children, the local branch of the British Legion, and the Children's Seaside Fund. The latter two organisations are instrumental in providing a seaside holiday for children who would not otherwise receive such benefit.

The extent to which the N.S.P.C.C. co-operates with this Authority can be gauged from an examination of the appended list, which relates to visits by the Society's Officers to families in this district during the year 1935.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

CASES DEALT WITH BY THE N.S.P.C.C. IN SWINTON AND PENDLEBURY DURING
THE YEAR ENDED 31ST DECEMBER, 1935.

Case No.	Nature of Complaint	No. of Children	No. of Visits	Result.
6151	Advice sought ...	3	16	One child removed to Training Centre.
6160	Neglect (Medical)	2	4	Satisfactory.
6162	Neglect ...	4	11	Removed to Wales.
6163	" ...	2	8	Father disappeared. Mother helped.
6185	" ...	1	7	Child now attending Clinic.
6189	" ...	1	5	Satisfactory.
6191	Advice sought ...	1	3	"
6194	Neglect ...	3	6	"
6198	Other wrongs ...	3	5	"
6200	Neglect ...	3	14	"
6202	" ...	2	23	Still under supervision.
6204	" ...	3	10	Improvement. Still under supervision.
6221	Advice sought re Surgical boots ...	1	4	Satisfactory.
6223	Ill-treatment ...	2	6	"
6225	Other wrongs ...	4	6	"
6228	Neglect ...	1	11	"
6231	Advice sought ...	1	6	Girl sent to Training Home.
6232	Neglect ...	1	7	Satisfactory.
6235	" ...	1	13	"
6238	Poverty ...	2	4	"
6241	Neglect ...	3	6	"
6242	Advice sought ...	1	4	"
6243	" ...	1	7	Child sent to Convalescent Home.
6244	Neglect ...	1	5	Satisfactory.
6245	" ...	1	10	Still under supervision.
6256	" ...	2	5	Satisfactory.
6261	" ...	4	6	"
6275	" ...	4	7	"
6279	" (beyond control)	1	5	Child now in Institution.
6282	Ill-treatment ...	2	3	Satisfactory.
6283	Neglect ...	2	10	Still under supervision.
6294	" ...	5	8	Satisfactory. Clothing given.
6303	" (Vision) ...	1	5	Glasses provided.
6310	Advice sought ...	1	6	Satisfactory.
6315	Neglect (Failing to attend Clinic) ...	3	6	"
6321	Advice sought ...	1	3	"
6328	Neglect ...	4	6	"
6333	Ill-treatment ...	3	7	"
6336	Neglect ...	1	8	Still under supervision.
6337	Ill-treatment ...	3	3	Satisfactory.
6352	Advice sought ...	1	3	"
6354	Neglect ...	7	4	Still under supervision.
6359	Advice sought ...	2	3	Satisfactory.
6363	" ...	2	2	"
6370	Neglect ...	2	4	Improvement.

Total number of cases	...	45
" children	...	99
" visits	...	305

13, Blind, Deaf, Defective, and Epileptic Children

The model regulations of the Board of Education for the detection of children coming under these categories are in operation, and work satisfactorily. A summary of such children in this district on 31st December, 1935, is given in Table III (Appendix).

Blind Children. At the end of the year 1935, there were three children of this district in an institution for partially blind. A further three were in attendance at public elementary schools, and one not in attendance at any school or institution, thus making a total of seven partially blind children in the district at the end of the year, as compared with six in the previous year. Partially blind children not in special schools are ear-marked for periodical examination by the School Ophthalmologist.

Deaf Children. There were no deaf children on the Register at the end of the year. The number of partially deaf children, i.e., those children who can appropriately be taught only in a school for the partially deaf, was five, four of whom were in residence at a Certified School for the partially deaf, and one in attendance at a public elementary school.

Mentally Defective Children. During the year 1935, a Sub-committee was appointed by the Local Education Committee to inquire into the procedure of the Authority with regard to the "mentally sub-normal child." A brief summary of the information submitted to, and the recommendations of, the Sub-committee are set out in paragraph (f) in Section 1 of this Report (page 16).

The number of **feeble-minded** children on the Register at the end of the year was 20, eight of whom were in attendance at public elementary schools and the remainder at no school or institution. It should be noted that the remainder referred to, 12 in number, are all over school age, but under 16 years.

A summary is given of feeble minded children in relation to their suitability or otherwise for attendance at Special Classes or Special Schools. The final portion of the table, i.e., relating to ineducable children, covers those children who have been notified to the Local Mental Deficiency Authority as being incapable of receiving benefit from instruction at a Special School. These children, although still residing in this district, are the responsibility of the Local Mental Deficiency Authority.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

	Suitable for Special Class		Suitable for Special School		Ineducable	
	Attending School	Not Attending School	Attending School	Not Attending School	Attending School	Not Attending School
Boys	1	3	2	3	—	6
Girls	—	3	5	3	1	2
Total	1	6	7	6	1	8

Epileptic Children. On the 31st December, 1935, there were four children in the district suffering from severe epilepsy, two of whom were in attendance at public elementary schools. No new cases were discovered at the Routine Medical Inspections, but the supervision of the department was continued as in former years over all cases of epilepsy, whether minor or severe, which had come to its notice through these inspections.

Physical Defective Children. The numbers of physically defective children in this district on 31st December, 1935, are shown on Table III (Appendix).

Children suffering from some form of **tuberculosis** receive the attention of the County Tuberculosis Department. The arrangements made by the local Education Authority for **crippled children** are adequate, and full particulars relating to treatment during the year 1935 are outlined in Section 5, paragraph (h) pages 28 and 29 of this Report. The treatment of children coming in the remaining two categories under the heading of Physically Defective children in Table III, namely, **delicate children** and **children with heart disease**, is provided for as far as possible at the Education Authority's Day Open-air School, an account of the work of which is given below.

Open-Air School

The Authority's Day Open-air School is situated in one of the few open spaces remaining in the district, namely, Swinton Park Fields. The site is admirably positioned, being in the southern portion of the Borough on the first high ground after leaving the large area of flat country of South Lancashire and North Cheshire. The present school buildings have been in use for eighteen years, and the attention of the Education Committee is at the moment being given to the erection of new school buildings on the same site.

The Board of Education, in its Administrative Memorandum for Educational Development (Circular 1,444) draws attention to the need for surveying the facilities in existence for the education and care of the debilitated school child. The action of this Authority in connection with the Memorandum is outlined in Section I of this Report, paragraph (d) of which deals with Open-air School provision.

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

The following extract from a letter recently received by the School Medical Officer from Miss Brobson, head teacher at the Open-Air School, illustrates the desirability of retaining the present site for the erection of the new school.

Miss Brobson writes :—

“ Obviously these wood buildings, which have been useful for eighteen years have perished. It is gratifying to know however that the beautiful site still remains the possession of the Authority, and come what may in the shape of shelter the “ out-of-door ” life can still continue. Along with the proposed new buildings will come the spray baths, and the children will enjoy the glorious vigour of the daily spray. The possibility of the provision (for a nursery class) of a specially large open shelter, placed amongst these fields, so as to catch every ray of sunshine must stir the imagination of the parents whose “ little ones ” need this life to bring them to the normal standard of Health.”

The work of the school proceeded during 1935 on lines similar to those of previous years. The children admitted have been those suffering from such conditions as anæmia, enlarged cervical glands, malnutrition, etc. The admissions and discharges during the year are set out in the following tables.

OPEN-AIR SCHOOL ADMISSIONS DURING 1935.

Disease	Boys	Girls	Total
Bronchitis	14	14	28
Bronchitis and Debility	1	—	1
Bronchitis and Malnutrition	1	—	1
Anaemia	3	8	11
Anaemia and Debility	1	—	1
Debility	11	15	26
Debility and Malnutrition	1	—	1
Nervous Debility	2	3	5
Infantile Paralysis	—	1	1
Rheumatism	1	6	7
Heart Disease	4	2	6
Adenitis	5	2	7
Arthritis	—	1	1
Asthma	2	1	3
Otorrhoea	—	1	1
Post-Diphtheria	—	3	3
Post-Whooping-cough	1	—	1
Post-Pneumonia	1	—	1
Post-Osteotomy operation... ..	1	—	—
Totals	49	57	106

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

DISCHARGED DURING 1935.

	Boys	Girls	Total
Over school-age	—	3	3
Returned to former school ...	50	63	113
Unfit for any school	—	—	—
Left district	—	2	2
Deceased	—	—	—
All reasons	50	68	118

15. Nursery Schools

There are no Nursery Schools in the area.

However, a system of Nursery Classes attached to Infants' Schools has been in existence for several years. Attention was drawn to the need for Nursery Schools in the Board of Education's Circular 1,444, previously referred to under Section 1 of this Report, and the Education Committee, after giving full consideration to the whole question, have concluded that Nursery Classes are a more practicable proposition than Nursery Schools for a district of this type. The policy of developing Nursery Classes in Infants' Schools in preference to founding Nursery Schools is therefore to be continued. The reasons for the decision as outlined in the Report of the Sub-committee appointed to deal with the suggestions contained in Circular 1,444 are as follows :—

The Report states :—

“ This policy, it is fair to state, has been eminently successful and possesses moreover certain very definite advantages :—

- (a) It is in all ways more economical : the Nursery School in practice is an expensive proposition ;
- (b) It has the educational and psychological advantage of securing the continuity of progress from class to class, which is an important influence in the life of the young child. The transfer of a child from one school to another has a greater effect upon the child than is often realised.”

The Education Committee at the same time gave sanction to the provision of the recognised type of ablution rooms in the existing Nursery Classes.

16. Secondary Schools

There is no secondary school situated within the district. There are, however, between 250 and 300 children (the most recent census, 1st April, 1933, revealed the number as being 274) ordinarily resident

in this district in attendance at Secondary Schools in adjacent areas, and although no arrangements can be made by this Authority for the routine inspection of such children, the facilities for treatment afforded by this Council are not refused when any child under 16 years of age attends one or other of the Clinics.

17. Parents' Payments

The difficulties involved in the individual assessment of parents' payments in respect of children attending the Minor Ailments and Dental Clinics is overcome by the requirement that every child attending for treatment is expected to place a few coppers in a collecting-box provided for the purpose.

With regard to other forms of treatment, viz. operative treatment for removal of tonsils and adenoids, orthopædic treatment, etc., in respect of which the numbers are not so large as to make inquiry into family circumstances impracticable, the parents are assessed according to a scale set by the Education Committee, and any contributions due are required to be paid before admission to hospital.

There is no scheme in operation for the provision of spectacles free of cost or at reduced rates. The total sum involved in the provision of spectacles rarely exceeding 4s. 6d. makes such a provision unnecessary in the majority of cases, while parents who so desire are given permission to make the payment in instalments.

18. Health Education

The only form of propaganda specially directed to school children undertaken during the year was that in connection with dental work.

A provisional arrangement had been made whereby the School Dental Surgeon should visit schools for the purpose of addressing children on the importance of dental care and hygiene. Certain schools were visited early in the year, but it was found impossible to continue the arrangement. It is hoped to include this type of propaganda in the School Dental Scheme as soon as opportunity permits.

19. Special Inquiries

No special inquiries were conducted during the year.

The Nutrition Survey commenced towards the end of the year 1934, was completed in the early months of 1935, and a full report thereon appeared in the Annual Report for the year 1934, pages 44 to 47.

20. Employment of School Children

New bye-laws for regulating the employment of children under the Children and Young Persons Act 1933 (Part II) were adopted by this Authority in January, 1935, and came into operation on the following 1st April. The bye-laws of 1923 were thus repealed.

Certificates under the bye-laws granted by the School Medical Officer during the year reached a total of 101 in the case of newspaper delivery and 23 for milk delivery. Seven certificates were issued to school-boys presenting themselves at the clinic with reference to their fitness to act as delivery boys in other permissible trades. There were four occasions during the year on which applications for certificates had to be refused. Three were legitimate applications turned down for health reasons; the fourth instance related to a boy who had provisionally arranged to become a "lather boy," a form of employment prohibited to school children under the bye-laws.

In the **employment of young persons**, the School Medical Service is able to co-operate with two important services, namely, the Factory Surgeon Service, of which the School Medical Officer is the Certifying Factory Surgeon, and the Advisory Committee for Juvenile Employment.

During the year 1935, the School Medical Officer, in virtue of his office of Certifying Factory Surgeon, examined 956 young persons between the ages of 14 and 16 years, of whom 10 only were rejected and 85 passed subject to certain conditions of employment suitable to their physical or mental capacity.

Employment of Young Persons.

		Examined	Certified	Rejected
Young persons between 14 and 16 years of age	Male ...	290	289	1
	Female ...	666	657	9
	Total ...	956	946	10

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

Young Persons Rejected.

Defect	Number of Persons		
	Rejected	Passed subject to conditions	Total
Subnormal nutrition or development ...	—	8	8
Deformity ...	1	1	2
Disease of Skin ...	1	3	4
Disease of Bones and Joints ...	1	—	1
Disease of Glands...	—	10	10
Disease of Lungs ...	—	—	—
Disease of Circulatory System ...	1	7	8
Disease of Nervous System ...	2	3	5
Disease of Ear, Nose, or Throat ...	2	18	20
Disease of Eyes and Defective Vision ...	2	15	17
Dental Defects ...	—	10	10
Non-medical reasons ...	—	—	—
Total ...	10	75	85

The value of the combined appointment of School Medical Officer and Certifying Factory Surgeon is exemplified by the advantage possessed by the latter in having before him at the time of examination of juvenile entrants to factory life, a register of all defects, physical and mental, previously discovered by the School Medical Service, and in some cases the additional information supplied by environmental and infant welfare records.

21. Swimming Baths

Arrangements exist for the attendance of School children at the Public Baths once a week during the summer months. The attendances during 1935 reached totals of 10,511 for boys and 3,144 for girls, as compared with 10,494 and 3,504 respectively in the previous year.

On the submission that valuable time was lost by school children from the Moorside, Clifton, and St. Charles R.C. Schools in having to walk to and from the baths, the Education Committee have arranged for these children to be conveyed by bus during the 1936 swimming season.

APPENDIX

Board of Education Returns

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

MEDICAL INSPECTION RETURNS YEAR ENDING 31st DECEMBER, 1935.

TABLE I.

MEDICAL INSPECTIONS OF CHILDREN ATTENDING PUBLIC ELEMENTARY SCHOOLS.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups :

Entrants	...	...	...	...	...	...	498
Second Age Group	...	...	...	...	...	...	435
Third Age Group	...	...	...	...	...	...	461
Total	...	...	...	...	...	...	<u>1394</u>

Number of other Routine inspections Nil

B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	...	2439
Number of Re-Inspections	...	...	...	...	1847
Total	...	...	...	...	<u>4286</u>

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

Number of individual children found at Routine Inspection to require
Treatment (excluding Uncleanliness and Dental Diseases).

Prescribed Groups :

Entrants	...	...	...	...	...	37
Second Age Group	...	...	...	...	...	80
Third Age Group	...	...	...	...	...	85
Total (Prescribed Groups)	...	...	...	...	...	202
Other Routine Inspections	...	...	...	...	...	—
Grand Total	...	...	...	...	...	<u>202</u>

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

TABLE II

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED
31ST DECEMBER, 1935.

DEFECT OR DISEASE		Routine Inspections No. of Defects		Special Inspections No. of Defects	
		Referred for treat- ment	Requiring to be kept under observation but not requiring treatment	Referred for treat- ment	Requiring to be kept under observation but not requiring treatment
SKIN	Ringworm—				
	(Scalp)	—	—	1	—
	(Body)	—	—	1	—
	Scabies	—	—	14	—
	Impetigo	2	—	152	—
EYES	Other Diseases (non-Tuberculous)	6	—	127	2
	Blepharitis	6	—	32	—
	Conjunctivitis	3	—	106	—
	Keratitis	—	—	—	—
	Corneal Opacities	—	—	7	—
	Defective Vision (excluding Squint)...	73	38	18	—
	Squint	7	1	16	1
EAR	Other Conditions	—	—	51	3
	Defective Hearing	—	—	3	—
	Otitis Media	—	—	46	—
	Other Ear Disease	3	1	22	—
NOSE & THROAT	Chronic Tonsillitis only	22	61	50	4
	Adenoids only	2	1	6	—
	Chronic Tonsillitis and Adenoids	24	8	11	—
	Other Conditions	3	4	154	27
Enlarged Cervical Glands (non-Tuberculous)		10	7	36	2
Defective Speech		—	1	1	—
HEART AND CIRCULA- TION	Heart Disease—				
	Organic	1	24	1	3
	Functional	—	6	—	6
	Anaemia	16	6	18	3
LUNGS	Bronchitis	2	12	66	14
	Other Non-Tubercu- lous Diseases	—	2	5	2
	Pulmonary—				
TUBER- CULOSIS	Definite	—	—	—	—
	Suspected	—	—	—	—
	Non-Pulmonary—				
	Glands	—	—	1	—
	Bones and Joints	—	—	—	—
	Skin	—	—	—	1
	Other Forms	—	1	—	1
NERVOUS SYSTEM	Epilepsy	—	—	—	—
	Chorea	—	—	6	—
	Other Conditions	1	5	7	1
DEFOR- MITIES	Rickets	—	—	1	—
	Spinal Curvature	3	1	1	—
	Other Forms	8	1	23	2
Other Defects and Diseases		40	27	833	53
TOTAL		232	207	1816	125

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

TABLE II

B.—CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS.

AGE GROUPS	No. of Children Inspected	A (Excellent)		B (Normal)		C (Slightly Subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants	498	180	36.14	277	55.62	41	8.24	—	—
Second Age Group ...	435	178	40.92	221	50.81	33	7.59	3	0.68
Third Age Group ...	461	78	16.92	295	63.99	87	18.87	1	0.22
Other Routine In- spections	—	—	—	—	—	—	—	—	—
TOTAL	1394	436	31.28	793	56.89	161	11.55	4	0.28

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

TABLE III.

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA, AS ON 31ST DECEMBER, 1935.

	At Certified Schools		At Public Ele-mentary Schools	At other Insti-tutions	At no School or Insti-tution	Total
	Wholly	Partially				
Blind	—	—	—	—	—	—
Partially Blind ...	—	3	3	—	1	7
Deaf	—	—	—	—	—	—
Partially Deaf ...	—	4	1	—	—	5
Feeble-minded ...	—	—	8	—	12	20
Epilepsy	—	—	2	—	2	4
Physically Defective :						
A. (i) Pulmonary Tuberculosis	—	—	2	—	5	7
(ii) Non-Pulmonary	—	—	7	1	4	12
B. Delicate Children ...	107	—	38	—	8	153
C. Crippled Children ...	—	—	27	—	8	35
D. Children with Heart Disease	4	—	20	—	8	32

Multiple Defects : 1 boy (hemiplegia and feeble-minded) attending Public Elementary School.

TABLE IV.

TREATMENT TABLES.

GROUP I.—MINOR AILMENTS (EXCLUDING UNCLEANLINESS, FOR WHICH SEE TABLE VI).

Disease or Defect	Number of defects treated, or under treatment during the year		
	Under the Author-ity's Scheme	Otherwise	Total
Skin :			
Ringworm—Scalp			
(i) X-Ray treatment ...	—	—	—
(ii) Other	—	1	1
Ringworm—Body	1	—	1
Scabies	13	—	13
Impetigo	155	—	155
Other Skin Diseases	120	3	123
Minor Eye Defects (external and other, but excluding cases fall-ing in Group II.)	187	—	187
Minor Ear Defects	62	—	62
Miscellaneous, <i>e.g.</i> , minor injuries, bruises, sores, chilblains, etc. ...	573	33	606
TOTAL	1111	37	1148

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

GROUP II.—DEFECTIVE VISION AND SQUINT (EXCLUDING MINOR EYE DEFECTS TREATED AS MINOR AILMENTS—GROUP I.)

Defect or Disease	Number of defects dealt with		
	Under the Authority's Scheme	Other-wise	Total
Errors of Refraction (including Squint). Operations for Squint should be recorded separately in the body of the Report ...	336	—	336
Other Defect or Disease of the Eye (excluding those recorded in Group I) ...	26	—	26
TOTAL ...	362	—	362

Total number of children for whom spectacles were prescribed :

(a) Under the Authority's Scheme, 152.

(b) Otherwise, nil.

Total number of children who obtained or received spectacles :

(a) Under the Authority's Scheme, 149.

(b) Otherwise, 2.

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT. NUMBER OF DEFECTS.

Received Operative Treatment										Received other forms of Treatment	Total number treated		
Under the Author- ity's Scheme in Clinic or Hospital				By Private Practi- tioner or Hospital, apart from the Authority's Scheme				Total					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	153	258
—	—	99	—	—	—	6	—	—	—	105	—		

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids.
(iv) Other Defects of the Nose and Throat.

GROUP IV.—ORTHOPAEDIC AND POSTURAL DEFECTS.

	Under the Authority's Scheme			Otherwise			Total No. Treated
	Residential Treatment with Education	Residential Treatment without Education	Non-Residential Treatment at an Orthopaedic Clinic	Residential Treatment with Education	Residential Treatment without Education	Non-Residential Treatment at an Orthopaedic Clinic	
No. of Children Treated ...	—	10	159	—	—	—	159

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

TABLE V—DENTAL DEFECTS

(1) Number of Children who were :—				(2) Half-days devoted to :—			
(i) Inspected by the Dentist :				Inspection	...	40	} Total 447
Aged :				Treatment	...	407	
under	5...	230	} Total 3612				
	5...	240					
	6...	300					
	7...	413					
	8...	386					
Routine Age	9...	384					
Groups	10...	418					
	11...	376					
	12...	361					
	13...	450					
	14...	54					
Specials	...	...	832				
Grand Total	...	...	4444				
(ii) Found to require treatment				(3) Attendances made by children for treatment			
...				...			
(iii) Actually treated				(4) Fillings :—			
...				Permanent teeth	1517	} Total 1688	
...				Temporary teeth	171		
(ii) Found to require treatment				(5) Extractions :—			
...				Permanent teeth	677	} Total 3223	
(iii) Actually treated				Temporary teeth	2546		
...				(6) Administrations of general anaesthetics for extractions			
...				...			
(ii) Found to require treatment				(7) Other operations :—			
...				Permanent teeth	754	} Total 760	
(iii) Actually treated				Temporary teeth	6		
...				...			

TABLE VI

UNCLEANLINESS AND VERMINOUS CONDITIONS.

(i) Average number of visits per school made during the year by the School Nurses	... .. 6
(ii) Total number of examinations of children in the Schools by School Nurses	... .. 12,092
(iii) Number of individual children found unclean	... .. 602
(iv) Number of children cleansed under arrangements made by the Local Education Authority —
(v) Number of cases in which legal proceedings were taken :	
(a) Under the Education Act, 1921 —
(b) Under School Attendance Bye-Laws —

SCHOOL MEDICAL OFFICER'S ANNUAL REPORT

Form 307M.

BOARD OF EDUCATION.

Local Education Authority,

BOROUGH OF SWINTON AND PENDLEBURY.

Mental Deficiency (Notification of Children) Regulations, 1928.

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED DURING THE YEAR ENDED
31ST DECEMBER, 1935, BY THE LOCAL EDUCATION AUTHORITY TO THE LOCAL
MENTAL DEFICIENCY AUTHORITY.

Total number of children notified, Nil.

PRINTED BY
ATLAS PRINTING CO., PENDLETON AND SWINTON
(SALFORD 6).



